## OFFICE OF FINANCIAL AND INSURANCE REGULATION JOB VACANCY NOTICE

CLASS/LEVEL: Departmental Manager 14

**DIVISION/SECTION**: Health Plans Division

**DEADLINE TO RESPOND**: 12-9-08

INTERESTED APPLICANTS SHOULD SUBMIT A RESUME, COVER LETTER, DLEG APPLICATION, A TWO-PAGE WRITING SAMPLE AND A COPY OF COLLEGE TRANSCRIPTS (INTERNET BASED TRANSCRIPTS ARE NOT ACCEPTED) TO DLEG, OFFICE OF FINANCIAL AND INSURANCE REGULATION, HUMAN RESOURCES/BUDGET DIVISION/OFIR 08-86, P.O. BOX 30220, LANSING, MICHIGAN 48909 OR FAX TO (517) 335-1450 BY THE DEADLINE DATE.

County/Location	Ingham/Lansing		
Pay Range	\$24.27-\$36.16/hour		
DESCRIPTION OF POSITION	Manage the Patient's Right to Independent Review Act (PRIRA), and the Timely Claims Processing and Payment Procedure. This includes directing and participating in the development, interpretation, evaluation and recommendation of policies, procedures and rules in these areas and interpreting laws, policies and procedures as they relate to the Michigan regulatory laws.		
EDUCATION	Possession of a bachelor's degree in any major.		
EXPERIENCE	Four years of professional, business and administrative experience, including two years equivalent to the experienced (P11) level or one year equivalent to the advanced (12) level; or, one year of professional managerial or specialist experience, in any field of work, equivalent to the 13 level or above.		
SPECIAL REQUIREMENTS			
D	Posting No.:	OFIR 08-86	
RESPOND TO	Address:	DLEG, Office of Financial & Insurance Regulation, Human Resources/Budget Division/OFIR08-86, P. O. Box 30220, Lansing, MI 48909	
	E-Mail Address:		
	Fax:	(517) 335-1450	

The State of Michigan is an Equal Opportunity Employer
Civil Service Rule 1-7 states: All persons offered employment in the classified service are required to submit to
and pass a pre-employment drug test as a condition of employment

employment.

CS-214 REV 3/2001

1. Position Code
DEPTMGR3B83N

## State of Michigan Department of Civil Service

Capitol Commons Center, P.O. Box 30002 Lansing, MI 48909

Federal privacy laws and/or state confidentiality requirements protect a portion of this information.

## POSITION DESCRIPTION

This form is to be completed by the person that occupies the position being described and reviewed by the supervisor and appointing authority to ensure its accuracy. It is important that each of the parties sign and date the form. If the position is vacant, the supervisor and appointing authority should complete the form.

This form will serve as the official classification document of record for this position. Please take the time to complete this form as accurately as you can since the information in this form is used to determine the proper classification of the position. **THE SUPERVISOR AND/OR APPOINTING AUTHORITY SHOULD COMPLETE THIS PAGE.** 

2.	Employee's Name (Last, First, M.I.)	8.	Department/Agency
			LABOR & ECONOMIC GROWTH
3.	<b>Employee Identification Number</b>	9.	Bureau (Institution, Board, or Commission)
			OFFICE OF FINANCIAL AND INSURANCE REGULATION
4.	Civil Service Classification of Position	10.	Division
	DEPARTMENTAL MANAGER 14		HEALTH PLANS DIVISION
5.	Working Title of Position (What the agency titles the position)	11.	
	position)		APPEALS SECTION
	DEPARTMENTAL MANAGER		
6.	Name and Classification of Direct Supervisor	12.	Unit
	JOAN MOILES, STATE DIVISION ADMINISTRATOR 17		
7.	Name and Classification of Next Higher Level Supervisor	13.	Work Location (City and Address)/Hours of Work
	STEVE HILKER, CHIEF DEPUTY COMMISSIONER, STATE		611 W. OTTAWA, LANSING
	BUREAU ADMINISTRATOR 18		8:00 a.m 5:00 p.m., Monday - Friday

## 14. General Summary of Function/Purpose of Position

Manage the Patient's Right to Independent Review Act (PRIRA), and the Timely Claims Processing and Payment Procedure. This includes directing and participating in the development, interpretation, evaluation and recommendation of policies, procedures and rules in these areas and interpreting laws, policies and procedures as they relate to the Michigan regulatory laws.

For	Civil	Service	Use	Onl	ly
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15. Please describe your <u>assigned</u> duties, percent of time spent performing each duty, and explain what is to complete each duty.	lone
List your duties in the order of importance, from most important to least important. The total percent of all duties performed must equal 100 percent.	age
Duty 1	
General Summary of Duty 1 % of Time 40	
Manage review of cases filed under the Patient's Right to Independent Review Act	
Individual tasks related to the duty.	
<ul> <li>Ensure OFIS is meeting statutory requirements for handling appeals of claim denials by commercial insurers and Blue Commercial and Health Maintenance Organizations.</li> </ul>	oss
Supervise and direct the operations of this complex insurance regulation.	
<ul> <li>Ensure consistency of approach in meeting requirements by staff on these complex issues.</li> </ul>	
<ul> <li>Respond to inquiries and requests for information relative to handling these claims.</li> </ul>	
<ul> <li>Respond to Freedom of Information Act requests, requests from consumer, legislators, attorneys, insurance companies are others regarding complaints.</li> </ul>	ıd
<ul> <li>Participate in committees on behalf of deputy commissioner and/or the commissioner with regard to this regulation.</li> </ul>	
Duty 2	
General Summary of Duty 2 % of Time 35	
Review cases filed under the Patients' Right to Independent Review Act.	
Individual tasks related to the duty.	
Review cases filed under the Patient's Right to Independent Review Act	
<ul> <li>Determine whether cases should be reviewed as a contractual issue or referred to an independent review organization for a</li> </ul>	,
medical review.	ı
Draft final Patient's Right to Independent Review Act decisions for a legal review within timeframe required under applications.	cable
law.	

Duty 3			
General Summary of Duty 3 % of Time 10			
Manage the Timely Claims Processing and Payment Procedure			
Individual tasks related to the duty.			
• Ensure OFIS is meeting statutory requirements for handling appeals for Medicaid claims not paid withing 45 days by HMOs.			
Supervise and direct the operations of this complex operation			
Insure consistency of approach in meeting requirements by staff on these complex issues.			
Respond to inquires and requests for information relative to handling these claims.			
<ul> <li>Respond to Freedom of Information Act requests, requests from consumer, legislators, attorneys and others regarding complaints.</li> </ul>			
Duty 4			
General Summary of Duty 4 % of Time 10			
Direct and supervise staff in the performance of functions.			
Individual tasks related to the duty.			
<ul> <li>Develop and implement policies, work plans, procedures, and training for the section staff.</li> </ul>			
<ul> <li>Coordinate and direct staff by scheduling work assignments, setting work priorities, and tracking work progresses.</li> </ul>			
• Recruit, hire, and train staff and evaluate staff performances.			
• Ensure staff compliance with all federal, state and local regulations and OFIS rules governing work environment, including rules ensuring equal employment opportunities, etc.			
<ul> <li>Ensure compliance with department and Civil Service rules, regulations and guidelines.</li> <li>Monitor and evaluate employee performance.</li> </ul>			
• Wonton and evaluate employee performance.			

Duty 5			
Ger	neral Summary of Duty 5 % of Time <u>5</u>		
Dev	relop and implement policies, procedures and guidelines		
	ividual tasks related to the duty.		
	Develop, implement or modify policies, procedures and guidelines for section operation.		
•	Provide and analyze section statistics to demonstrate performance and demand/need to section services.		
•	Interpret laws, policies and procedures as they relate to the Patients' Right to Independent Review Act and report findings to deputy commissioner and the commissioner.		
•	Perform special projects and other duties as it relates to the Patients' Right to Independent Review Act.		
D 4			
<u>Dut</u>			
	neral Summary of Duty 6 % of Time 5		
Otn	er duties as assigned		
Ind	ividual tasks related to the duty.		
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16.	Describe the types of decisions you make independently in your position and tell who and/or what is affected by those decisions. Use additional sheets, if necessary.			
	This position has a wide latitude and responsibility in making decisions on complaints against BCBS and HMOs as it relates to cases filed under the Patients' Right to Independent Review Act. Insurers and their insureds in Michigan could be potentially affected by these decisions.			
17.	Describe the types of	decisions that require your superviso	or's review.	
	A decision that would	d significantly alter the mission and	d goals of the agency.	
18.			What environmental conditions are your hactivity and condition. Refer to inst	
			office environment which includes c sage and normal office routines. Sor	
19.			ees whom you immediately supervise the number of employees in each classifi	
	<u>NAME</u>	<b>CLASS TITLE</b>	<u>NAME</u>	<b>CLASS TITLE</b>
Vale	rie Glosson	Dept. Specialist 13		
John	McClintic	Dept. Specialist 13		
Cher	yl Kelley	Dept. Analyst 12		
Julie	Gloden	Secretary 9		
20.	20. My responsibility for the above-listed employees includes the following (check as many as apply):			
	<b>⊠</b> Complete and s	sign service ratings.	Assign work.	
		written counseling.		
			Review work.	
		and attendance.	□ Provide guidance on work     □	
	<b>⊠</b> Orally reprima	and.	☐ Train employees in the wo	ork.
21.	I certify that the a	bove answers are my own and a	are accurate and complete.	
	-	Signature	<del></del>	Date

NOTE: Make a copy of this form for your records.

	TO BE COMPLETED BY DIRECT SUPERVISOR				
22.	Do you agree with the responses from the employee for Items 1 through 20? If not, which items do you disagree with and why?				
	I agree.				
- 22	What are the constitution of the control of the con				
23.	What are the essential duties of this position?				
	The essential duties of this position are to manage and direct the appeals section as it relates to the statutory requirements for handling appeals of claim denials by BCBSM and HMOs under the Patients' Right to Independent Review Act; and the Timely Claims Processing and Payment Procedure. In addition, this person must interpret laws and develop, interpret and implement relevant policies and procedures.				
24.	Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.				
25.	What is the function of the work area and how does this position fit into that function?				
	This work area is responsible for reviewing and analyzing subscriber certificate filings, employer agreement filings,				
	grievance procedures filings, rate system filings, provider contract filings, licensure applications and relicensure applications made by various noninsurance entities, including nonprofit health care corporations (Blue Cross), nonprofit dental care corporations, health maintenance organizations, alternative financing and delivery systems and multiple employer welfare arrangements. This work area also responds to inquiries from the public and other agencies about the benefits, marketing materials, grievance procedures and premium rates filed by the entities and monitors the compliance of these entities with relevant statutes and administrative rules that relate to the pricing and marketing of health benefits. This position is responsible for managing the appeals section which includes the statutory requirements for the Patients' Right to Independent Review Act, and the Medicaid Timely Claims Processing and Payment Procedure.				

26.	In your opinion, what are the minimum education and experience qualifications position.	needed to perform the essential functions of this			
EDU	EDUCATION:				
	Possession of a bachelor's degree in any major.				
EXD	MEDIENCE				
EXP	<b>PERIENCE:</b> Four years of professional, business and administrative experience, including	g two years aguivalent to the experienced (P11)			
	level or one year equivalent to the advanced (12) level; or, one year of profany field of work, equivalent to the 13 level or above.				
KNO	OWLEDGE, SKILLS, AND ABILITIES:				
	Knowledge and experience in health care and health insurance law. Knowledge of the legislative process and governmental organization and structure. Knowledge of training and supervisory techniques. Ability to instruct, direct and evaluate employees. Ability to analyze and evaluate data for use in program development and analysis. Ability to interpret laws, rules and regulations relative to OFIS. Ability to communicate effectively. Ability to formulate policies and procedures. Knowledge and experience in contract law.				
CER	RTIFICATES, LICENSES, REGISTRATIONS:				
	E: Civil Service approval of this position does not constitute agreement with or acceptant				
27.	I certify that the information presented in this position description p of the duties and responsibilities assigned to this position.	provides a complete and accurate depiction			
	Supervisor's Signature	Date			
	TO BE FILLED OUT BY APPOINTING				
28.	Indicate any exceptions or additions to the statements of the employee(s) or supo	ervisor.			
20	I contifu that the outside on these pages are accounts and accounts				
<i>4</i> 9.	I certify that the entries on these pages are accurate and complete.				
1	Appointing Authority's Signature	Date			